

PTO/SB/30 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031

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Request	Application Numb	er	10/643,2	256					
for	Filing Date		August 1	18, 2003					
Continued Examination (RCE)  Transmittal	First Named Inve	ntor	Stephen P. ZADESKY						
Address to:		ILOI		TT. ZADLSKI					
MS RCE Commissioner for Patents	Art Unit		2629						
P.O. Box 1450 Alexandria, VA 22313-1450	Examiner Name		J. H. Ng	uyen					
	Attorney Docket N	umber	1068420	000600					
This is a Request for Continued Examination (RCE) un Request for Continued Examination (RCE) practice under 37 8, 1995, or to any design application.									
Submission required under 37 CFR 1.114 Not amendments enclosed with the RCE will be entered in applicant does not wish to have any previously filed un amendment(s).	the order in which they wer	e filed unl	ess applicar	nt instructs otherwise. If					
a. Previously submitted. If a final Office ac may be considered as a submission eve	ction is outstanding, any en if this box is not check	amendm æd.	ents filed a	after the final Office action					
i. Consider the arguments in the Appea	al Brief or Reply Brief pre	viously fil	led on						
iiOther									
b. x Enclosed	<u> </u>								
i. X Amendment/Reply iii. X Information Disclosure Statement (IDS)									
ii. Affidavit(s)/Declaration(s)	iv. Other								
2. Miscellaneous									
a. Suspension of action on the above-iden	tified application is requ	ested und	der 37 CFF	R 1.103(c) for a					
period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)									
b. Other									
3. Fees The RCE fee under 37 CFR 1.17(e) is req	uired by 37 CFR 1.114 w	hen the R	ÇE is filed.						
The Director is hereby authorized to cha overpayments to Deposit Account No.	03-1952 + have Fee	<del>/o onclos</del> Transmit	ed a dupli	cate copy of this sheet. PTO/SB/17) is attached to					
i. X RCE fee required under 37 CFR 1.1	17(e)								
ii. Extension of time fee (37 CFR 1.136	and 1.17)								
iii. Other			-0.15 - <b>65:51</b> 1	NTT- 00000199 031059 [[8	4325				
b. Check in the amount of \$		sed bi FC:	2007 32281 1881	799.69 DA					
c. Payment by credit card (Form PTO-2038		01 10.	1001						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED									
Signature Clex Cl	tone	Date	June 25	, 2007					
me (Print/Type) Alex Chartove		Registra	tion No.	31,942					

PTO/SB/17 (06-07)

Fee Paid (\$)

June 25, 2007

Fee (\$)

Approved for use through 06/30/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under Net Page 1910 uction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/643,256 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number FEE TRANSMITTAL August 18, 2003 Filing Date Stephen P. ZADESKY First Named Inventor For FY 2007 **Examiner Name** J. H. Nguyen 2629 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 106842000600 TOTAL AMOUNT OF PAYMENT 790.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Other (please identify): Check Morrison & Foerster LLP x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **SEARCH FEES EXAMINATION FEES FILING FEES Small Entity Small Entity** Small Entity Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Application Type Fee (\$) Fee (\$) Fee (\$) 200 100 Utility 300 150 500 250 200 100 100 50 130 65 Design 160 80 100 300 150 200 Plant 300 150 500 250 600 300 Reissue 100 0 0 0 200 n Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 100 Each independent claim over 3 (including Reissues) 200 Multiple dependent claims 360 180 Multiple Dependent Claims **Total Claims** Extra Claims Fee Paid (\$) Fee Paid (\$) Fee (\$) - 52 = HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee Paid (\$) - 8 = HP = highest number of independent claims paid for, if greater than 3.

	- 100 =	/50 =	(round <b>up</b> to a wr	iole number) 3	·	=				
4. OTHER FEE(S	)					Fees Paid (\$)				
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., lat	790.00									
SUBMITTED BY										
Signature	(1000	Clatin	Registration No.	31,942	Telephone	(703) 760-7744				

Number of each additional 50 or fraction thereof

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Extra Sheets** 

Alex Chartove

Name (Print/Type)

3. APPLICATION SIZE FEE

**Total Sheets**